State of Vermont
Buildings and General Services
Office of Purchasing & Contracting 10 Baldwin St Montpelier VT 05633-7501 United States

Page 1 of 5 Contract ID 00000000000000000000026908 **Contract Dates** Origin 06/01/2014 to 06/01/2016 CPŠ Description: Contract Maximum CPS - FIRST AID SUPPLIES \$999,999.99

**Buyer Phone** 

Contract Status

Approved

Buyer Name

LaRose, Deborah L 828-4635

Vendor ID 0000334880 Henry Schein Inc 135 Duryea Road Melville NY 11747-7382 **United States** 

Phone #-(800) 472-4346

Phone #: (800) 472-4346					
Line # Item ID	Item Desc	UOM	Unit Price	Max Qty	Max Amt
1	BANDAGE, 3/4" X 3", ADHESIVE FABRIC, 100/BOX, ASO CORP #1126132	вох	0.85000	0.00	0.00
2	BANDAGE 1" X 3", ADHESIVE FABRIC, 100/BOX, ASO CORP #1126133	вох	1.02000	0.00	0.00
3	FINGERTIP FABRIC BANDAGE, LARGE, 25/BOX, CERTIFIED SAFETY, DERMA SCIENCE #AWCAABFV2UD0	вох	0.77000	0.00	0.00
4	KNUCKLE FABRIC BANDAGE, 50/BOX, CERTIFIED SAFETY, COVIDIEN #44106	вох	1.76000	0.00	0.00
5	FABRIC BANDAGE, 2" X 4-1/2" ADHESIVE FLEXIBLE, X-LARGE, STERILE, LATEX FREE, 50/BOX, DYNAREX #3614	вох	3.66000	0.00	0.00
6	ABD 5" X 9", TRAUMA PAD, STERILE, DURAL #5590	EA	0.10000	0.00	0.00
7	DRESSING, GAUZE, 2" X 2", STERILE, I-WRAP, 12-PLY, 24/BOX, DURAL #1212	вох	0.56000	0.00	0.00
8	DRESSING, GAUZE, 4" X 4", STERILE 12-PLY 2'S 50/PK, DURAL #1412	вох	5.29000	0.00	0.00
9	GAUZE, STRETCH 3" CONFORMING, ROLL BANDAGE, STERILE, 12/BAG, DURAL #1049724	PK	1.48000	0.00	0.00
10	STERILE, OVAL 2 5/8" EYE PAD, 50/BOX, DURAL #841	вох	3.27000	0.00	0.00
11	PLASTIC EYE CUP, 6/BOX, GRAINGER #8ULU2	BOX	2.95000	0.00	0.00
12	TAPE, PAPER, 1/2" X 10 YARDS, 24/BOX, DURAL #HP6110	вох	4.24000	0.00	0.00
13	TRIANGLE SLING/BANDAGE, 40" X 40" X 54", WITH 2 SAFETY PINS, DURAL #CTB40	EA	0.32000	0.00	0.00
14	ANTISEPTIC WIPES, STING FREE, 20/BOX, FIRST AID #FAE-4002	вох	4.53000	0.00	0.00
15	TRIPLE ANTIBIOTIC OINTMENT, 1 GM, 24/BOX, CERTIFIED SAFETY #233-360	вох	1.97000	0.00	0.00
16	GAUZE, STRETCH, 2" X 4.1 YARD CONFORMING, NON-STERILE, 12/RLS/PK., DURAL #1042739	PK	1.17000	0.00	0.00
17	COLD PACK, INDIVIDUAL BOX, INSTANT, 5" X 10", HOSPITAL MKTG #6627	EA	0.51000	0.00	0.00

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LaRose, Deborah L 828-4635

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18	SCISSORS, 4.5" NICKEL PLATED, MAGNUM, CHANBY #CH115	EA	0.53000	0.00	0.00
19	TWEEZERS, DISPOSABLE, 36/CASE, MEDIQUE PHARM. #77233	CS	2.96000	0.00	0.00
20	EYE WASH, IRRIGATING, ISOTONIC, STERILE, 4 OZ., ATTAIRE PHARM. #175-35	EA	1.05000	0.00	0.00
21	INSECT STING SWAB, 10/BOX, GLASS TUBE IN PLASTIC TUBE, JAMES ALEX. #19-001	вох	1.51000	0.00	0.00
22	BURN GEL, BURN FREE, PAIN RELIEVING, 6/BOX, PACCKIT #13-010	вох	1.35000	0.00	0.00
23	HYDROGEN PEROXIDE PUMP SPRAY, 2 OZ., WATERJEL TECH #HP2-24	EA	1.23000	0.00	0.00
24	SPLINTER OUT, LUBRICATING TOOL, 10/BOX, MEDIPOINT INC	вох	1.00000	0.00	0.00
25	RESCUE BREATHER, ONE WAY VALVE FOR CPR POCKET MASK, MEDSOURCE #MS-PMV	EA	1.01000	0.00	0.00
26	GAUZE, PAD, STERILE, 3" X 3", 12 PLY, USP TYPE VII, INDIVIDUALLY PACKAGED, 100/BOX, DURAL CORP #1312	вох	3.10000	0.00	0.00
27	PROVIDONE IODINE (PVP) PREP PADS, 100/BOX, PDI PROF. DISP. #B40600	вох	4.27000	0.00	0.00
28	POCKETMASK W/O2 INLET, MEDSOURCE #MS-PM103W	EA	3.76000	0.00	0.00
29	BLANKET, SPACE RESCUE, MILAR FOIL 84" X 52", DURAL CORP #721	EA	0.42000	0.00	0.00
30	WRAP, KIM FLEX, TAN 2" X 5 YARDS, UNSTRETCH, CAREMAX #HS9004322	EA	0.27000	0.00	0.00
31	TONGUE DEPRESSOR ADULT, NON STERILE, WOOD, 500/BOX, DALIAN GOODWOOD #1002416	вох	2.53000	0.00	0.00
32	ABDOMINAL PAD 8" X 10", 18/BOX, DURAL CORP #5810	BOX	2.66000	0.00	0.00
33	VENTILATOR, SUREVENT, DISPOSABLE, TUBING/HOSE/MANOMETER, 10/CS. HARTWELL #SV2131-10	cs	588.49000	0.00	0.00
34	INTRAVENOUS (IV) ARMBOARD REUSABLE 3" X 9", 50/CS., MORRISON #1024-50	CS	74.89000	0.00	0.00

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Description:		Contract Maximum
CPS - FIRST AID SUPPLIES		\$999,999.99
Buyer Name	Buyer Phone	Contract Status
LaRose Deborah L 828-4635		Approved

Phone #: (800) 472-4346

FIIOII	e #:(800) 4/2-4346		Unit	Max	Max
Line # Item ID	Item Desc	UOM	Price	Qty	Amt
35	CATHETER INTRAVENOUS (IV) 18 GAUGE X 1.25", 50/BOX, 200/CS, TERUMO COREP #SR-0X1832CA	CS	144.01000	0.00	0.00
36	CATHETER INTROVENOUS (IV) 20 GAUGE X 1.25", 50/BOX, 200/CS, TERUMO CORP #SR0X2032CA	CS	144.01000	0.00	0.00
37	CATHETER INTRAVENOUS (IV) 22 GAUGE X 1.25", 50/BOX, 200/CS., TERUMO CORP #SR-0X2225CA	CS	144.01000	0.00	0.00
38	IV SOLUTION, SODIUM CHLORIDE 0.9%, 1000 ML BAG, 14 EA/CS., HOSPIRA #07983-09	CS	54.15000	0.00	0.00
39	ACE BANDAGE 2" X 5 YARD, 10/BOX, PART #4996039	вох	2.80000	0.00	0.00
40	SAM SPLINT PART #4992562	EA	5.73000	0.00	0.00

CONTRACT TERMS AND ADDITIONAL INFORMATION

STATE OF VERMONT ATTACHMENT C: STANDARD STATE CONTRACT PROVISIONS DATED NOVEMBER 7, 2012 AND ATTACHMENT D: COMMODITY PURCHASES TERMS AND CONDITIONS DATED NOVEMBER 10, 2010 ARE ATTACHED AND INCORPORATED AS PART OF THIS ORDER.

SCOPE: TO PROVIDE FIRST AID SUPPLIES THROUGHOUT THE STATE OF VERMONT ON AN AS NEEDED BASIS.

CONTRACT TERM: THIS CONTRACT IS WRITTEN FOR A PERIOD OF TWENTY-FOUR (24) MONTHS WITH THE OPTION TO RENEW FOR TWO (2) ADDITIONAL TWELVE MONTH PERIODS.

THE VISA PURCHASING CARD MAY BE USED AS FORM OF PAYMENT UNDER THIS CONTRACT.

TERMS: NET 30 DAYS

QUANTITY: THE ANNUAL VALUE AND QUANTITIES ARE ESTIMATED ONLY BASED ON PRIOR USAGE; ACTUAL PURCHASES MAY BE HIGHER OR LOWER DEPENDING ON THE STATE'S NEEDS. THE CONTRACT MAXIMUM IS NOT REFLECTIVE OF ACTUAL USAGE.

DELIVERY: RESPONSIBILITY FOR PRODUCT DELIVERY REMAINS WITH THE CONTRACTOR UNTIL THE PRODUCT IS PROPERLY DELIVERED AND SIGNED FOR IN ACCORDANCE WITH THE OFFICE OF PURCHASING & CONTRACTING TERMS AND CONDITIONS. SHIPMENTS SHALL BE SECURELY AND PROPERLY PACKED, ACCORDING TO ACCEPTED COMMERCIAL PRACTICES, WITHOUT EXTRA CHARGE FOR PACKING CASES OR OTHER CONTAINERS. SUCH CONTAINERS WILL REMAIN THE PROPERTY OF THE STATE UNLESS OTHERWISE STATED. DELIVERED GOODS THAT DO NOT CONFORM TO THE SPECIFICATIONS OR ARE NOT IN GOOD CONDITION UPON RECEIPT SHALL BE REPLACED PROMPTLY BY THE CONTRACTOR.

PRICING: ALL PRICING IS TO INCLUDE F.O.B. DELIVERY TO THE ORDERING FACILITY. NO REQUEST FOR EXTRA DELIVERY COST WILL BE HONORED. ALL EQUIPMENT SHALL BE DELIVERED ASSEMBLED, SERVICED, OILED, AND READY FOR IMMEDIATE USE, UNLESS OTHERWISE REQUESTED BY THE PURCHASING AGENCY.

QUALITY: ALL PRODUCTS PROVIDED UNDER THESE AGREEMENTS WILL BE NEW AND UNUSED, UNLESS OTHERWISE STATED. FACTORY SECONDS OR REMANUFACTURED PRODUCTS WILL NOT BE ACCEPTED UNLESS SPECIFICALLY REQUESTED BY THE PURCHASING AGENCY. ALL PRODUCTS PROVIDED BY THE CONTRACTOR MUST MEET ALL FEDERAL, STATE, AND LOCAL STANDARDS FOR QUALITY AND SAFETY REQUIREMENTS. PRODUCTS NOT MEETING THESE STANDARDS WILL BE DEEMED UNACCEPTABLE AND RETURNED TO THE CONTRACTOR FOR CREDIT AT NO CHARGE TO THE STATE.

METHOD OF ORDERING: PURCHASE ORDERS MUST BE USED TO ORDER ITEMS AVAILABLE UNDER THIS CONTRACT. IF VERBAL ORDERS ARE GIVEN A CONFIRMING PURCHASE ORDER MUST BE ISSUED.

INVOICING: ALL INVOICES ARE TO BE RENDERED BY THE CONTRACTOR ON THE VENDOR'S STANDARD BILLHEAD AND FORWARDED

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CPS - FIRST AID SUPPLIES		\$999,999.99	
Buyer Name	Buyer Phone	Contract Status	
LaRose, Deborah L	828-4635	Approved	

Phone #: (800) 472-4346

					Unit	Max	Max
Line #	Item ID	Item Desc		UOM	Price	Qty	Amt
DIREC	TLY TO THE INSTIT	TUTION OR AGENC'	ORDERING MATERIALS OR SE	ERVICES AND SHALL S	PECIFY THE AD	DRESS TO WHICH	
PAYME	NTS WILL BE SEN	IT					

CANCELLATION: THE STATE SPECIFICALLY RESERVES THE RIGHT TO CANCEL THE CONTRACT, OR ANY PORTION THEREOF, IF, IN THE OPINION OF ITS COMMISSIONER OF BUILDINGS AND GENERAL SERVICES, THE SERVICES OR MATERIALS SUPPLIED BY THE CONTRACTOR ARE NOT SATISFACTORY OR ARE NOT CONSISTENT WITH THE TERMS OF THE CONTRACT

DEFAULT: IN CASE OF DEFAULT OF THE CONTRACTOR, THE STATE MAY PROCURE THE MATERIALS OR SUPPLIES FROM OTHER SOURCES AND HOLD THE CONTRACTOR RESPONSIBLE FOR ANY EXCESS COST OCCASIONED THEREBY, PROVIDED, THAT IF PUBLIC NECESSITY REQUIRES THE USE OF MATERIALS OR SUPPLIES NOT CONFORMING TO THE SPECIFICATIONS THEY MAY BE ACCEPTED AND PAYMENT THEREFORE SHALL BE MADE AT A PROPER REDUCTION IN PRICE.

REPORTING REQUIREMENTS: CONTRACTORS WILL BE REQUIRED TO SUBMIT QUARTERLY PRODUCT SALES REPORT TO THE PURCHASING AGENT PURSUANT TO THE SCHEDULE BELOW. EACH REPORT MUST CONTAIN THE FOLLOWING INFORMATION: CONTRACT NUMBER; USING DEPARTMENT'S ADDRESS, CONTACT NAME, AND TELEPHONE NUMBER; PRODUCT ORDERED; QUANTITY ORDERED; QUANTITY SHIPPED; AND PRICE CHARGED, WITH TOTALS FOR EACH PRODUCT FOR EACH REPORTING PERIOD. WE RESERVE THE RIGHT TO REQUEST ADDITIONAL INFORMATION OR TO MODIFY THE REPORTING PERIODS.

REPORTING PERIODS: QUARTERLY REPORTS MUST BE SUBMITTED IN ACCORDANCE WITH THE FOLLOWING SCHEDULE:

REPORTING PERIOD: JANUARY 1 TO MARCH 31 - REPORT DUE APRIL 15 REPORTING PERIOD: APRIL 1, TO JUNE 30 - REPORT DUE JULY 15 REPORTING PERIOD: JULY 1 TO SEPTEMBER 30 - REPORT DUE OCTOBER 15 REPORTING PERIOD: OCTOBER 1 TO DECEMBER 31 - REPORT DUE JANUARY 15

CONTRACT TERMS: THIS CONTRACT WILL BE SUBJECT TO REVIEW THROUGHOUT ITS TERM. THE STATE WILL CONSIDER CANCELLATION UPON DISCOVERY THAT A VENDOR IS IN VIOLATION OF ANY PORTION OF THE AGREEMENT, INCLUDING AN INABILITY BY THE VENDOR TO PROVIDE THE PRODUCTS, SUPPORT, AND/OR SERVICE OFFERED IN THEIR RESPONSE.

VERMONT STATE COLLEGES: THIS CONTRACT IS ALSO AVAILABLE FOR USE BY THE UNIVERSITY OF VERMONT AND THE VERMONT STATE COLLEGES INC., A SEPARATE CORPORATION, HAVING UNDER ITS JURISDICTION CASTLETON STATE COLLEGE, JOHNSON STATE COLLEGE, LYNDON STATE COLLEGE, COMMUNITY COLLEGE OF VERMONT, AND THE VERMONT TECHNICAL COLLEGE.

TOWNS AND SCHOOLS OF THE STATE OF VERMONT: AT THE BIDDER'S ELECTION POLITICAL SUBDIVISIONS AND INDEPENDENT COLLEGES OF THE STATE MAY PARTICIPATE IN STATE CONTRACTS AT THE SAME PRICES, TERMS AND CONDITIONS. ITEMS FURNISHED TO POLITICAL SUBDIVISIONS AND INDEPENDENT COLLEGES WILL BE BILLED DIRECTLY TO AND PAID FOR BY THE POLITICAL SUBDIVISIONS OR INDEPENDENT COLLEGES AND NEITHER THE STATE NOR ITS COMMISSIONER OF BUILDINGS AND GENERAL SERVICES PERSONALLY OR OFFICIALLY ASSUMES ANY RESPONSIBILITY FOR THESE PAYMENTS.

AGENCIES & DEPARTMENTS ARE REQUESTED TO ADVISE THE PURCHASING AGENT AT ONCE OF THE FAILURE ON THE PART OF THE CONTRACTOR TO FULFILL ANY OF THE TERMS OR CONDITIONS OF THIS CONTRACT.

PLEASE REFER TO THE ASSIGNED CONTRACT NUMBER/PURCHASE ORDER # ON ALL CORRESPONDENCE, DELIVERY DOCUMENTS AND INVOICES.

VENDOR CONTACT INFORMATION:
JESSE GARRINGER
TELEPHONE 800-845-3550
FAX 800-533-4793
EMAIL JESSE.GARRINGER@HENRYSHEIN.COM

IF YOU HAVE ANY QUESTIONS REGARDING THIS DOCUMENT PLEASE CONTACT:

DEB LaROSE, PURCHASING AGENT,

TELEPHONE 802-828-4635,

FAX 802-828-2222

E-MAIL: deb.larose@state.vt.us

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LaRose.Deborah L	828-4635	Approved

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Line # Item ID Item Desc UOM Price Qty Amt

THE FOLLOWING PRODUCTS ARE REQUIRED ON AN AS NEEDED BASIS FOR FACILITIES THROUGHOUT THE STATE OF VERMONT.

THERE ARE NO SPECIFIC TIME FRAMES WHEN ORDERS ARE PLACED FOR THESE PRODUCTS. THEREFORE ORDERS AMY BE PLACED DEPENDING ON FUNDING AVAILABILITY.

AVAILABILITY: DELIVERY WILL BE EXPECTED 7-4 DAYS FROM DATE OF ORDER.

PERFORMANCE MEASUREMENTS:

DELIVERY ARE REQUIRED WITHIN TWO WEEKS OF ACCEPTANCE OF A PURCHASE ORDER, UNLESS THE CONTRACT HAS ADVISED THE CUSTOMER OF AN ALTERNATE SCHEDULE. THE ACCEPTABLE LEVEL FOR ON-TIME DELIVERY WILL BE 99%; THE CUSTOMER WILL REPORT ANY DELIVERIES THAT DO NOT MEET THE CONTRATOR PROMISED DELIVERY DATE TO THE STATE CONTRACT MANAGER.

THE CONTRATOR MUST COMPLETE THE REPORTING REQUIREMENTS OUTLINED IN THE CONTRACT. A FAILURE BY THE CONTRATOR TO COMPLETE THEIR QUARTER REPORTING ON TIME IN TWO-CONSECUTIVE QUARTERS WILL RESULT IN A CONTRACT REVIEW WITH POTENTIAL CONSEQUENCES AS SEVERE AS TERMINATION.

CHANGE #1 - 03/31/2015 - TO ADD ITEM #39 AND #40 TO THE EXISTING CONTRACT PER A REQUEST FROM AOT.

ATTACHMENT C: ATTACHMENT C: STANDARD STATE CONTRACT PROVISIONS FOR CONTRACTS AND GRANTS DATED MARCH 1, 2015 SEE ATTACHED, WHICH SUPERSEDES ALL PRIOR VERSIONS OF ATTACHMENT C.

CONTRACTOR CERTIFIED UNDER THE PAINS AND PENALTIES OR PERJURY THAT AS OF THE DATE THIS CONTRACT AMENDMENT IS SIGNED, CONTRACTOR IN IS GOOD STANDING WITH RESPECT TO OR IN FULL COMPLIANCE WITH A PLAN TO PAY ANY AND ALL TAXED DUE THE STATE OF VERMONT.

ALL OTHER PRICES. TERMS AND CONDITIONS REMAIN THE SAME.

#### WE THE UNDERSIGNED PARTIES AGREE TO BE BOUND BY THIS CONTRACT

By the STATE of VERMONT	By the CONTRACTOR
Date:	Date:
Signature:	Signature:
Name:	Name:
Title:	Title:
Email:	Email: